

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	DEVICE AND SOFTWARE PACKAGE FOR EXTRACTING A GEOLOGICAL HORIZON AND RELATED PROPERTIES
Attorney Docket Number::	0528-1134
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JEAN-CLAUDE
Middle Name::
Family Name:: DULAC
Name Suffix::
City of Residence:: SUGARLAND
State or Province of TEXAS
Residence::
Country of Residence:: UNITED STATES OF AMERICA
Street of Mailing 2634 WILLIAMS GRANT
Address::
City of Mailing Address:: SUGARLAND
State or Province of Mailing Address:: TEXAS
Country of Mailing Address:: UNITED STATES OF AMERICA
Postal or Zip Code of Mailing Address:: 77479

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: FABIEN
Middle Name::
Family Name:: BOSQUET
Name Suffix::
City of Residence:: NANCY
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 33, RUE DE LA RAVINELLE
Address::
City of Mailing Address:: NANCY

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-54000

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: EMMANUEL

Middle Name::

Family Name:: LABRUNYE

Name Suffix::

City of Residence:: NANCY

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 14, RUE CAMILLE MATHIS

Address::

City of Mailing Address:: NANCY

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-54000

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR03/01753	6/11/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02/07596	6/19/02	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::